Personnel—General

Aviation Service of Rated Army Officers

Headquarters
Department of the Army
Washington, DC
15 December 1994

Unclassified

SUMMARY of CHANGE

AR 600-105 Aviation Service of Rated Army Officers

This revision--

- o Revises eligibility requirements for award of aeronautical ratings (chap 2 and table 2-2).
- o Adds credit for time logged in a Synthetic Flight Training System (SFTS) or Combat Mission Simulator(CMS) toward Senior/Master Wings (Exception: flight surgeons) (table 2-2, note (3)).
- o Adds criteria for requesting a Total Operational Flying Duty Credit (TOFDC) waiver for gate eligibility(para 3-8).
- o Transfers the responsibility for issuing orders for Army Reserve flight surgeons to the CDR, U.S. Army Reserve Personnel Center (ARPERCEN), effective 1 October 1994 (para 3-11).
- o Revises gate criteria for continuous Aviation Career Incentive Pay (ACIP) (table 3-3).
- o Clarifies requirements for aeromedical evaluations(chap 4).
- o Updates procedures for nonmedical disqualification and requalification (chap 4).
- o Expands and clarifies Flying Evaluation Board(FEB) procedures (chap 6).

*Army Regulation 600-105

Effective 15 January 1995

Personnel—General

Aviation Service of Rated Army Officers

By Order of the Secretary of the Army: GORDON R. SULLIVAN General, United States Army Chief of Staff

netter of de the

Official:

MILTON H. HAMILTON Administrative Assistant to the Secretary of the Army

History. This issue publishes a revision of this publication.Because the publication has been extensively revised, the changed portions have not been highlighted.

Summary. This regulation covers the aviation service policies of rated Army officers and flight surgeons.

Applicability. This regulation applies to Active Army and Reserve Component officers and warrant officers (Army National

Guard and United States Army Reserve) ordered into aviation service by the Secretary of the Army.It also applies to all commissioned and warrant officers who are training for or have Army aeronautical ratings.The policies and procedures of this regulation remain in effect upon declaration of war or mobilization.

Proponent and exception authority. The proponent of this regulation is the Deputy Chief of Staff for Personnel. The proponent has the authority to approve exceptions to this regulation which are consistent with controlling law and regulation. Proponents may delegate this approval authority in write

controlling law and regulation. Proponents may delegate this approval authority, in writing, to a division chief within the proponent agency in the grade of colonel or the civilian grade equivalent.

Army management control process.

This regulation is subject to the requirement of AR 11–2. It contains management control provisions, but does not contain checklists for assessing management controls. These checklists are being developed and will be published at a later date.

Supplementation. Supplementation of this

regulation and establishment of command and local forms are prohibited without prior approval from HQDA (DAPE–MBI), WASH, DC 20310–0300.

Interim changes. Interim changes to this regulation are not official unless they are authenticated by the Administrative Assistant to the Secretary of the Army. Users will destroy interim changes on their expiration dates unless sooner superseded or rescinded.

Suggested Improvements. Users are invited to send comments and suggested improvements on DA Form 2028 (Recommended Changes to Publications and Blank Forms) directly to U.S. Total Army Personnel Command (TAPC-PLT-A).

Distribution. Distribution of this publication is made in accordance with the requirements on DA Form 12–09–E, block number 3606, intended for command levels A, B, C, D, and E for Active Army, U.S. Army Reserve, and Army National Guard.

Contents (Listed by paragraph and page number)

Chapter 1

Introduction, page 1
Purpose • 1–1, page 1
References • 1–2, page 1
Explanation of abbreviations and terms • 1–3, page 1
Responsibilities • 1–4, page 1

Chapter 2

Aeronautical Ratings, page 1

General • 2–1, page 1 Publishing the aeronautical order • 2–2, page 1 Aeronautical rating eligibility requirements • 2–3, page 1 Applying for an aeronautical rating • 2–4, page 1 Format and distribution • 2–5, page 1

Chapter 3

Aviation service for Rated Officers, page 5

Section I
Qualification for Aviation Service, page 5
Rated officer inventory • 3–1, page 5
Aviation service authority • 3–2, page 5
Initial qualification for aviation service • 3–3, page 5

Aviation service entry date • 3-4, page 5

Section II

Aviation Career Incentive Pay, page 5
Qualification factors • 3–5, page 5
Total Federal Officer Service • 3–6, page 6
Total operational flying duty credit • 3–7, page 6
Total operational flying duty credit waiver • 3–8, page 6
Operational flying duty for flight surgeons • 3–9, page 6
Flight surgeons annual minimum flying hours • 3–10, page 6
Operational flying duty orders for flight surgeons • 3–11, page 7

Section III
Termination, page 7
Reasons for termination • 3–12, page 7

Chapter 4

Aeromedical Disqualification, page 8
Disqualification factors • 4–1, page 8
Procedures • 4–2, page 8
Temporary medical suspension • 4–3, page 9
Medical termination • 4–4, page 9
Medical requalification after medical termination from aviation service • 4–5, page 9
Aeromedical waivers • 4–6, page 9

^{*} This regulation supersedes AR 600-105,1 December 1983.

Contents—Continued

Chapter 5

Nonmedical Disqualification, page 10

Condition for nonmedical disqualification • 5-1, page 10

Nonmedical suspension • 5-2, page 10

Nonmedical suspension pending a Flying Evaluation Board • 5–3, $page\ 10$

Nonmedical disqualification not requiring Flying Evaluation Board action • 5-4, page 10

Nonmedical termination • 5-5, page 10

Requalification • 5-6, page 11

Chapter 6

Flying Evaluation Board, page 11

Standards • 6–1, page 11
Membership • 6–2, page 12
Procedures • 6–3, page 12
Appeals • 6–4, page 13
Time phasing • 6–5, page 13
Requalification • 6–6, page 13

Aviation service orders • 6-7, page 13

Chapter 7

Aeromedical Consultation and In-Flight Evaluation, page 13

Applicability • 7–1, page 13

Responsibilities • 7–2, page 13

Procedures for in-flight demonstration capability • 7-3, page 14

Aeromedical consultation service • 7–4, page 14

Temporary aviation service orders • 7-5, page 14

Travel orders • 7-6, page 14

Distribution of the final Aeromedical Consultation In-flight Evaluation Report • 7–7, page 14

Appendixes

- A. References, page 15
- **B.** List of Addresses, page 15

Table List

- Table 2-1: Awarding aeronautical ratings, page 2
- Table 2-2: Eligibility requirements for aeronautical ratings, page 2
- Table 2-3: How to apply for an aeronautical rating, page 3
- Table 2-4: Application for reentry in aviation service, page 4
- Table 3-1: Entry into aviation service, page 7
- Table 3-2: Aviation Service Entry Date, page 7
- Table 3-3: Gate criteria for continuous ACIP, page 8
- Table 3-4: Flight surgeons annual flying hour minimums, page 8
- Table 3–5: Aviation service termination authority, page 8
- Table 5-1: Suspension authority, page 11

Glossary

Index

Chapter 1 Introduction

1-1. Purpose

This regulation—

- a. Sets policies, responsibilities, and procedures for—
- (1) Awarding Army aeronautical ratings.
- (2) Qualifying, disqualifying, and requalifying officers for aviation service.
- (3) Reviewing flight and personnel records of Army aviators to determine their qualifications to continue in aviation service.
 - b. Describes Army aeronautical ratings.
- c. Describes conditions for disqualification(or termination) and requalification for aviation service.
- d. Contains additional procedures for convening and conducting a Flying Evaluation Board (FEB).
- e. Contains procedures for an aeromedical consultation and inflight evaluation.

1-2. References

Required and related publications and prescribed and referenced forms are listed in appendix A.

1-3. Explanation of abbreviations and terms

Abbreviations and special terms used in this regulation are explained in the glossary.

1-4. Responsibilities

- a. The Deputy Chief of Staff for Operations and Plans (DCSOPS), has Army staff responsibility for determining the composition of Army aviation.
- b. The Deputy Chief of Staff for Personnel (DCSPER)has the authority to approve exceptions to this regulation which are consistent with controlling law and regulation. The DCSPER can delegate the authority in writing to the Commander, U.S. Total Army Personnel Command (PERSCOM)to—
- (1) Issue orders authorizing or terminating aviation career incentive pay.
- (2) Issue orders designating members of the U.S.Army Reserve (USAR) and Army National Guard of the United States (ARNGUS) as Army aviators.
- (3) Approve exception to policy requests on Class I or 1A flight physicals on a case-by-case basis.
 - (4) Approve aeromedical waivers.
- c. The CDR, PERSCOM, in coordination with other Army agencies and proponents, will assist in developing, recommending and executing personnel policies, requirements, and organization of Army aviation elements.
- d. Unit commanders will establish procedures to ensure compliance with the policy and procedures outlined in this regulation.

Chapter 2 Aeronautical Ratings

2-1. General

- a. Army aeronautical ratings are awarded by the Secretary of the Army (SA) to—
- (1) Commissioned and warrant officers (WOs) on extended active duty.

- (2) Active commissioned and WOs of the Reserve Components (RCs) of the U.S. Army.
- b. Eligibility requirements must be met before awarding the rating.
- c. After the rating is awarded, it becomes a part of the officer's credentials. A rating can be removed by the following—
- (1) Commanders having General Court-Martial Convening Authority (GCMCA) in taking final action on a Flying Evaluation Board (FEB) or as stated in AR 672–5–1, paragraph 1–29.
- (2) The awarding headquarters or HQDA for fraud or administrative error.
- (3) Chief, National Guard Bureau (CNGB) in taking final action on a FEB.
- d. Army aeronautical ratings will not be awarded to members of other military services or foreign armed forces. See AR 672–5–1, paragraph 5–15 for award of aviation badges and certificates to persons who are not U.S. Army officers.

2-2. Publishing the aeronautical order

Ratings are awarded by publishing an aeronautical order (AR 310-10, format 331).

- a. An aeronautical rating certifies successful completion of prescribed aviation or aviation medicine training. Before an officer may fly and be entitled to Aviation Career Incentive Pay (ACIP), he or she must be qualified for aviation service. This will be authorized in the aeronautical order awarding the rating.
- b. The aeronautical order awarding the rating of Army aviator or flight surgeon (table 2–1), as well as other awards of advanced ratings, also authorizes wear of the proper aviation badge (AR 672–5–1).

2-3. Aeronautical rating eligibility requirements

U.S. Army aeronautical ratings are awarded to Army officers according to table 2-2.

2-4. Applying for an aeronautical rating

To apply for an aeronautical rating, follow procedures in table 2–3 or table 2–4 as applicable. CG, U.S. Army Aviation Center (USAAVNC), Ft. Rucker, AL, will award the initial rating when the training has been successfully completed.

2-5. Format and distribution

- a. Only the CDR, PERSCOM or CG, USAAVNC, will issue an initial rating of Army aviator or flight surgeon. Use AR 310–10, paragraph 3–19, format 331, for issuing all orders.
- b. ARNGUS personnel must apply for aviation service orders according to paragraph 3-2.
- c. A copy of the aeronautical order will become a permanent part of the official military personnel file (OMPF) and individual flight records folder (IFRF).
- d. A copy of the aeronautical order is distributed to PERSCOM (TAPC-PLT-A), U.S. Army Reserve Personnel Center (ARPER-CEN), and NGB (addresses at app B). Flight surgeon orders are distributed to PERSCOM(TAPC-OPH-MC)and to ARPERCEN (ARPC-OPC-AV)for USAR flight surgeons. Five copies of the order are distributed to the individual.

Table 2-1		
Awarding	aeronautical	ratings

Rating	Awarded By	Awarded to
Army Aviators or Flight Surgeons.	CG, USAAVNC.	Officers who have never held an aeronautical rating from a U.S. military service; officers who complete flight training; posthumously; officers who complete aviation medicine training (commissioned Medical Corps only, not aeromedical physician assistants (table 2–2)).
	CDR, PERSCOM (TAPC-PLT-A)	Interservice transfers who previously held an aeronautical rating in another service; officers recalled to active duty or appointed in an RC who previously held an aeronautical rating in another service.
	CDR, PERSCOM (TAPC-OPH-MC), or CNGB for flight surgeons.	Flight Surgeons. See table 2–2 for interservice transfer of flight surgeons.
Senior Army Aviator and Master Aviator.	Commanders who have General Court Martial Convening Authority (GCMCA), CDR, ARPERCEN and CDR, U.S. Army Reserve Command (USARC).	All officers except ARNGUS officers.
	CNGB.	ARNGUS officers.
Senior Flight Surgeon and Master Flight Surgeon.	CDR, ARPERCEN, TSG, CNGB.	USAR officers not on extended duty. Active duty officers. ARNGUS officers.

Table 2–2		
Fligibility requirements	for aeronauti	cal ratings

Rating	Rated Service ¹	Requirements	Apply	Other
Army Aviator	Army commissioned officer or warrant officer; graduate of the Initial Entry Rotary Wing Entry (IERW) Course.	Completion of course requirements.	No	Medically qualified class II.
	Graduate of fixed wing (FW) or rotary wing (RW) pilot training by another U.S. military service.	Completion of course requirements.	Yes	Medically qualified class II. PERSCOM will determine training requirements per AR 95–1 when accepting the officer into the U.S. Army.
Senior Army Aviator	At least 7 years of rated aviation service(4 years must be as an Army aviator).	At least 84 months TOFDC $^{\rm 2}$ and 1000 hours of flying time $^{\rm 3}$.	Yes	Medically qualified class II (RC within 24 months); military instrument qualified (whether or not current).
Master Army Aviator	At least 15 years of rated aviation service (12 must be as an Army aviator) and Senior Army Aviator designation.	At least 120 months TOFDC 2 & 2000 hours of flying time 3 .	Yes	Medically qualified class II (RC within 24 months); military instrument qualified (whether or not current).
Flight Sur- geon	U.S. Army Flight Surgeon Primary Course.	Completion of course requirements.	No	Medically qualified class 2F. Medical students who complete the basic course are not awarded the rating until appointment in the Medical Corps.
	Graduate of like training by another U.S. military service, plus the Army Aviation Medicine Orientation Course.	Completion of course requirements.	Yes	Medically qualified class 2F. Medical students who complete the basic course are not awarded the rating until appointment in the Medical Corps.
Senior Flight Surgeon	At least 5 years operational flying duty as a flight surgeon and qualified for aviation service.	At least 400 hours of flying time or 300 hours in military aircraft and 100 hours civilian pilot time. 30 hours of the total time may be SFTS/CMS time.	Yes	Medically qualified class 2F.
	At least 2 years operational flying duty as a flight surgeon plus residency train- ing and board certification as a special- ist in aerospace medicine.	At least 300 hours of flying time or 250 hours in military aircraft and 50 hours civilian pilot time. 24 hours of the total time may be SFTS/CMS time.	Yes	Medically qualified class 2F.
	At least 3 years operational flying duty as a flight surgeon plus 2 years as an army aviator.	At least 350 hours of total flying time in military aircraft. 30 hours of the total time may be SFTS/CMS time.	Yes	Medically qualified class 2F.

Table 2–2 Eligibility requirements for aeronautical ratings—Continued				
Rating	Rated Service ¹	Requirements	Apply	Other
Master Flight Surgeon		At least 850 hours of flying time or 700 hours in military aircraft and 150 hours civilian pilot time. 60 hours of the total time may be SFTS/CMS time.	Yes	Medically qualified class 2F. Certified by American Board of Preventive Medicine as a specialist in aerospace medicine or comparable credentials as determined by OTSG, ARPERCEN or NGB ⁴ .

Notes:

⁴ Medical comparable credentials include board certification in another medical specialty that directly supports the Army aviation medicine program.

Aeronautical rating	Application will include—	Comments
Army aviator (with a rating from another U.S. military service)	A copy of the original aeronautical rating (USAF) or undergraduate flight training completion certificate (USN, USMC, USCG).	Include application as part of an interservice transfer (AR 614–120), a recall request (AR 135–210), or a direct appointment request (AR 135–100)through command channels to proper headquarters (table 2–1).
	An official certification of total military flying time by category (fixed or rotary wing), skill qualifications, and hours flown in the past 12 months.	
	A current class 2 flight physical completed within the last 12 months and approved by the U.S.Army Aeromedical Center (USAAMC) (see app B).	
	The following signed statement. "I understand that a service member who knowingly makes a false official statement may be punished under the Uniform Code of Military Justice (UCMJ), article 107. With this understanding I make the official statement below: Excluding medical suspension of less than 30 days, I have never been restricted or suspended from flight duty or involved in an aircraft accident other than (fully explain any of the below or if none so state)— a. Restrictions from flight duty. b. Suspensions from flight duty. c. Military aircraft accidents. d. Any other aircraft accidents."	
Army aviators other than above		CG, U.S. Army Aviation Center (USAAVNC), will make awards without application.
Flight Surgeons		CG, USAAVNC, CDR, PERSCOM (TAPC-OPH-MC), or CNGB will award all basic ratings.
Senior or Master Army Aviator	The original aeronautical rating order.lf applying for the Master award, include the Senior Army Aviator rating order.	To apply, complete DA Form 4187 (Personnel Action) through command channels to the proper headquarters(table 2–1).
	A current class 2 flight physical completed within the last 12 months, or the previous class 2 flight physical with a current DA Form 4186 (Medical Recommendation for Flying Duty) approved for flight duty for RC. It must be approved by the USAAMC.	
	The latest DA Form 759 (Individual Flight Record and Flight Certificate-Army) showing enough flying time; PERSCOM, (TAPC-PLT-A), ARPERCEN, or NGB documents concerning the status of TOFDC for members under their control per the ACIA-74 and/or ACIA-89.	
Army National Guard Personnel	For ARNGUS personnel, an application will be submitted according to NGR 600–105.	

¹ Rated service is computed from the date the officer was awarded the U.S. military aeronautical rating.

² Total Operational Flying Duty Credit (TOFDC). The cumulative months an aviator is assigned to operational (not proficiency or nonoperational) flying duty positions. TOFDC need not be accumulated within the gate time frame. See AR 570–4 for classification of operational flying duty positions.

³ Time logged in military aircraft as a student pilot, co-pilot, or instructor pilot (AR 95–1). The 700 hours required under the military or civilian acquired skills program may be included for Senior or Master wings awards. Time logged in a Synthetic Flight Training System (SFTS) or Combat Mission Simulator(CMS), not to be confused with procedural trainers, may be included (exception: flight surgeons see table for guidelines).

Fable 2–3 How to apply for an aeronautical rating—Continued			
Aeronautical rating	Application will include—	Comments	
Senior or Master Flight Surgeon	The U.S. Army School of Aviation Medicine attendance dates and graduation. A copy of basic flight surgeon aeronautical rating. Include the senior flight surgeon rating if applying for the master award.	Apply through OTSG Aviation Medicine Consultant to CDR, PERSCOM (TAPC-OPH-MC).NGB flight surgeons apply to CNGB.	
	A copy of the original and other (if any) aviation service qualification orders.		
	A copy of the latest DA Form 759 and certified or notarized civilian flight time (if applicable), that shows enough flight time to qualify for award(table 2–2).	All addresses at appendix B.	
	A current class 2F flight physical completed within the last 12 months approved by CDR, USAAMC (HSXY-AER).		
	For master flight surgeon, a certificate from the American Board of Preventive Medicine indicating individual is a specialist in aerospace medicine, or comparable credentials as determined by OTSG, ARPERCEN, or NGB (table 2–2).		

Table 2–4 Application for reentry in avi	ation service	
Applicants	Application will include—	Comments
Aviators with aeronautical rat- ing from a U.S. military service (called or recalled to active du- ty)	DA Form 4187	Send request through command channels to CDR, PERSCOM (TAPC-PLT-A).
	Copy of original designation order (U.S.Army, USAF) or undergraduate flight training completion certificate (USN, USMC, or USCG).	
	Copy of current class 2 flight physical exam results completed within the previous 12 months and approved by CDR, USAAMC.	
	Copy of officer's record brief; DA Form 2 (Personnel Qualification Record—Part 1), or order determining Total Federal Officer Service (TFOS)and Aviation Service Entry Date (ASED).	
	Latest DA Form 759.	
	Current order to active duty and previous qualification order (when applicable).	
	Brief chronology of operational flying duty positions.	
	The signed statement below."I understand that a service member who knowingly makes a false official statement may be punished under the Uniform Code of Military Justice (UCMJ), article 107. With this understanding I make the following official statement (excluding medical suspension of less than 30 days). I have never been restricted or suspended from flight duty or involved in an aircraft accident other than (fully explain any of the below or if none so state)—a. Restrictions from flight duty. b. Suspensions from flight duty. c. Military aircraft accidents.	
USAR aviators	Name, grade, SSN, specialty and branch.	Send request through command channels to CDR, ARPERCEN (ARPC-OPC-AV) for those aviators changing from commissioned to warrant officer and vice versa.
	Current duty status, Active Guard Reserve(AGR), Troop Program Unit (TPU) or control group.	
	Unit and location.	
	Duty assignment, paragraph and line number.	
	Copy of original request.	
	Current copies of any suspensions and terminations of such suspensions.	
	Copy of current approved Class 2 flight physical.	
	Copy of current assignment orders.	

Brief chronology of operational flying duty positions.

Table 2-4
Application for reentry in aviation service—Continued

Applicants	Application will include—	Comments
	A signed statement prepared by the officer as follows, "I have/have not been suspended or relieved from aviation service before my release from active duty (REFRAD), discharge, or release from ARNGUS extended active duty." (If yes, explain).	

Notes:

If officer is medically disqualified, send application to CDR, USAAMC, ATTN: HSXY-AER.USAAMC will forward the application and a medical recommendation to CDR, PERSCOM. If the officer is disqualified because of an FEB, application must be sent to the proper FEB approving authority for action. Then forward to either CDR, PERSCOM, or CNGB as appropriate. See appendix B for all addresses.

Chapter 3 Aviation service for Rated Officers

Section I Qualification for Aviation Service

3-1. Rated officer inventory

- a. The following officers are considered in aviation service—
- (1) Commissioned officer aviators who maintain a pilot status code (PSC) of 1 and hold a basic branch code (BC) 15 (Aviation) or area of concentration (AOC) of 67J (Medical Service Corps).
- (2) Commissioned Medical Corps officers who maintain an AOC of 61N (MEDMOS 1, 2, or 3) and have been placed on operational flight status by CDR, PERSCOM; TSG;CDR, ARPERCEN; or CNGB.
- (3) Warrant officer and commissioned warrant officer aviators who maintain a PSC of 1 and primary military occupational specialty (PMOS) 152B through 156A.
- (4) All commissioned or WO aviators not on extended active duty who maintain PSC 1 and have an aviation specialty of 15, 67J or MOS 152–156, and who are—
- (a) Assigned to and performing operational flying duty (except Individual Ready Reserve (IRR)) or
 - (b) Assigned to a rated position in the RC or
- (c) Considered by components (active or reserve)as part of their rated inventory, each of whom, within the preceding 24 months, were rated officers on active duty or assigned to rated positions.
- (5) Flight surgeons are rated officers but are not included in the rated inventory.
- b. Aviation service orders will remain in effect for an officer's entire aviation career unless terminated(paras 3–11, 3–12, 4–4, 5–4, 5–5, and 6–3).
- c. All aviators and flight surgeons, whether or not assigned to operational flying duty positions, must meet class 2 medical fitness standards for aviators and class 2F medical fitness standards for flight surgeons for flying duty (AR 40–501), and be issued a medical clearance on DA Form 4186, Medical Recommendation for Flying Duty. Flight surgeons who resigned from aviation service (AR 616–110) or who have been terminated from aviation service by TSG; CDR, ARPERCEN; or CNGB, are not required to maintain class 2F medical certification.

3-2. Aviation service authority

The Secretary of the Army has authorized the commanders in table 3–1 to enter officers into aviation service.

3-3. Initial qualification for aviation service

- a. Officers are initially qualified for aviation service at the start of the initial flight training course leading to the award of an aeronautical rating.
- b. When warrant officer candidates (WOCs) receive their appointment as warrant officers, and start the initial flight training course they will be qualified for aviation service.
- c. The CG, USAAVNC, will publish initial aviation service orders using AR 310-10, format 331.
- d. When student officers fail the qualification course or are medically or nonmedically eliminated from the course before completion,

the aviation service order will be promptly terminated. They may be required to branch transfer as deemed appropriate by aviation assignment branch. If the officer is eliminated because of medical unfitness, aviation service will be terminated.

e. Aviation service is continuous unless the officer is terminated (chaps 3, 4, 5, and 6).

3-4. Aviation service entry date

- a. The initial aviation service order establishes an officer's aviation service entry date (ASED). Table 3–2 defines ASED for aviators and flight surgeons.
- b. ASEDs will only be adjusted when officers fail to complete the qualification course leading to the award of an aeronautical rating and are later accepted to reenter that course. The ASED will then become the date of reentry. There are no exceptions.

Section II Aviation Career Incentive Pay

3-5. Qualification factors

- a. Officers entitled to ACIP. Officers entitled to ACIP include those who—
- (1) Are entitled to basic pay.
- (2) Have an aeronautical rating.
- (3) Are student officers in training in the qualification course leading to the award of an aeronautical rating.
 - (4) Are qualified for aviation service (para 3–1).
- b. Continuous ACIP. Army aviators qualified for aviation service are entitled to continuous ACIP for 12 years following their ASED as long as they remain qualified (see Department of Defense Pay Manual (DODPM), tables 2-1-6 and 2-1-7 for rates, see para 3-5c(4) for flight surgeons). Table 3-3 applies to persons who qualify for continuous ACIP.
 - c. Monthly ACIP.
- (1) Aviators not entitled to continuous ACIP may receive monthly conditional ACIP only while serving in an operational flying position (AR 570–4). The pay rate will be the same as for continuous ACIP. These aviators must meet the monthly flight minimums (DODPM, part two, section B) to be eligible. When verified that the aviator is assigned to an operational flying position, the military personnel office will inform the servicing finance and accounting office (FAO) that the officer is eligible for monthly conditional ACIP. The effective date is the day the officer is assigned to the position. Conversely, the military personnel office will direct the FAO to stop ACIP when the officer leaves the position or fails to meet the flying requirements.
- (2) Officers (excluding warrant officers) below the rank of Brigadier General with more than 25 years of total federal officer service, who are qualified for aviation service and assigned to operational flying duty positions, are entitled to monthly conditional ACIP as prescribed in (1) above.
- (3) Officers not qualified for aviation service, who are required by competent orders to perform regular and frequent aerial flights, are not entitled to ACIP, but are entitled to monthly hazardous duty pay (See AR 600–106, Flying Status for Nonrated Army Aviation Personnel and DODPM, part two, chapter 1, section A.)
 - (4) Flight surgeons are entitled to monthly noncontinuous ACIP

only while serving on operational flying duty as determined by TSG; CDR, ARPERCEN; or CNGB. Flight surgeons must meet the minimum flight standards outlined in paragraphs 3–9 through 3–11. The "gate system" does not apply to flight surgeons.

d. ACIP for RC aviators, not on extended active duty. RC aviators, not on extended active duty, will receive ACIP as outlined in DODPM, part 8."Gate" review procedures for ARNGUS personnel are contained in NGR 600–105.

3-6. Total Federal Officer Service

Total Federal Officer Service (TFOS) is used to—

- a. Determine the ACIP rate for commissioned officers (2LT through COL) with more than 18 years of TFOS.
- b. Determine the 22 or 25 year termination date of continuous ACIP for commissioned officers (2LT through COL).

3-7. Total operational flying duty credit

- a. Conditions to receive credit for total operational flying duty credit (TOFDC). An aviator must be in aviation service, assigned to a position coded for operational flying (AR 570–4)on the unit MTOE or TDA, and meet flying requirements. For ARNGUS and USAR aviators, some career development and functional area training assignments may qualify as determined by the ARNGUS and USAR. In addition, TOFDC may be credited to the following—
- (1) Aviators who are prisoners of war or are declared missing in action
- (2) Aviators whose release from active duty is voided by the Army Board for Correction of Military Records (ABCMR).
- (3) Aviators who have been issued a temporary medical suspension for 180 days or less.
- b. Operational flying duty credit. Operational flying duty credit begins the day following the date the aviator signs out of a non-operational flying duty position enroute to an operational flying duty position. Credit is continuous until the aviator signs out enroute to a nonoperational flying duty position.
- c. Operational flying duty dates. TOFDC is recorded by number of months. The 15th day is the "break even" point for crediting or not crediting a month. For example, if an aviator signs out of a nonoperational flying duty position enroute to an operational flying duty position on the 14th day of a month or earlier, credit begins the following day and the month is counted. Conversely, if the date of sign out is the 15th day of a month or later, the month is not counted. If departure from an operational flying duty position is on the 15th day or later, the full month is counted. Departures on the 14th day or earlier cause the month not to be counted.
- d. Consecutive assignments. If an aviator remains in operational flying positions in consecutive assignments, credit is continuous. Leave, temporary duty (TDY), and travel time between assignments are included, except that aviators may not fly or accumulate TOFDC while attending nonaviation schools on temporary duty of 90 days or more. Officers attending the Aviation Officer Advanced Course after 1 October 1991, will receive TOFDC. Officers attending the Medical Service Corps or Combined Logistics Officer Advanced Course after 1 October 1991, and who also attend the five-week AIRNET/SIMNET portion of the Aviation Officer Advanced Course, will also receive TOFDC.
- e. Automated update of TOFDC. The Standard Installation Division Personnel System (SIDPERS) updates the officer master file based on departures from operational flying duty positions.SI-DPERS will not update TOFDC and the TOFDC"as of date" until the aviator departs an operational flying duty position enroute to a nonoperational flying duty position or departs an operational position on a permanent change of station, whichever occurs first. AR-PERCEN and NGB manually update TOFDC.

3-8. Total operational flying duty credit waiver

PERSCOM and Full Time Support Management Center (FTSMC) will attempt to manage an officer's aviation career assignment to meet gate requirements.Based on the needs of the Army, aviation

- officers may fail to meet the TOFDC gate requirements of table 3–3, but they will be eligible for a waiver.
 - a. Eligibility requirements.
- (1) Only aviation officers, commissioned or warrant, with an ASED of 1 October 1979 and after, who have failed to meet the TOFDC requirements for the new eligibility gates due to the needs of the service assignments, are eligible for a waiver. Needs of the service assignments are defined as—
 - (a) DOD or joint duty in a designated critical billet.
- (b) Army education requirements schooling (AERS)and utilization tour.
- (c) U.S. Army Recruiting Command (USAREC), Reserve Officer Training Corps (ROTC) or U.S. Military Academy(USMA) cadre assignment.
- (d) Aviation officer position (coded 15 or 67J)on the table of distribution and allowances (TDA) of the Army Staff (ARSTAF), field operating agency (FOA)of the ARSTAF in the National Capital Region, or major Army command (MACOM) headquarters without assigned aircraft.
- (e) Assigned when medically disqualified but subsequently requalified for aviation service.
- (2) TOFDC waivers will not apply to aviation officers who voluntarily decline operational flying assignments or elect to take nonoperational flying assignments which preclude TOFDC. Officers who decline operational flying assignments required to meet the first gate, will sign a declination memorandum from PERSCOM. The memorandum will be filed in the officers's career management individual file (CMIF).
 - b. Prerequisites for requesting a waiver.
 - (1) The officer must have accrued at least 72 months TOFDC.
- (2) The request must be submitted no earlier than 12 months prior to the gate for which the waiver is being requested.
- (3) Aviation officers who receive a waiver are not eligible for a second waiver.
- (4) Aviation officers applying for an 18-year gate waiver are only eligible for continuous ACIP to 22 years TFOS. They are not eligible for a waiver for pay to 25 years of TFOS, or from 22 to 25 years TFOS.
 - c. Waiver request procedures.
- (1) Submit the request for a waiver through command channels to the appropriate career management branch—TAPC-OPE-V, for officers; TAPC-OPW-AV, for warrant officers; TAPC-OPH-MS, for Medical Service Corps officers; TAPC-OPB-E, for Army Acquisition Corps officers; ARPERCEN, for USAR aviators; and NGB for ARNG aviators for verification.Respective components will forward the request to HQDA, DAPE-MBI for approval or disapproval.
- (2) PERSCOM and FTSMC/NGB career management branches will document officer's "needs of the service assignments" which precluded TOFDC. This will establish an audit trail should the officer require a waiver.

3-9. Operational flying duty for flight surgeons

- a. Flight surgeons are considered on operational flying duty when placed on aviation service orders by TSG, CDR, ARPERCEN or CNGB. This duty entitles them to monthly ACIP. Questionable cases will be submitted for review by OTSG, ARPERCEN or NGB.
 - b. Duties include the following—
- (1) Formal aviation medicine training leading to the award of an aeronautical rating.
- (2) Formal aerospace medicine residency training leading to certification in aerospace medicine.
- (3) An assignment to a position or location determined by TSG; CDR, ARPERCEN; or CNGB that requires the flight surgeon to conduct a local aviation medicine program.
- (4) Any assignment for an aerospace medicine specialist, primary AOC 61N9A/B/C, provided the person remains actively involved in an aviation medicine program.

3-10. Flight surgeons annual minimum flying hours

a. Flight surgeons assigned to flying duty must be credited a

minimum of 4 hours per month in any military aircraft for active duty and 2 hours per month for RC to qualify for monthly ACIP (DODPM, part two). Rules pertaining to the banking of hours apply. Table 3–4 defines minimum hourly requirements for flight surgeons.

- b. Semiannual and annual minimum requirements will be reduced proportionately for those who begin or end flying during a certain flying year.
- c. Local unit commanders whose mission includes little or no night flying are authorized to waive night hour requirements for their assigned or attached flight surgeons. Questionable cases may be referred to TSG;CDR,ARPERCEN; or CNGB for determination as applicable.In no case will a waiver be given for the minimum flying requirements for pay required by DODPM.
- d. Flight surgeons are considered essential aircrew and are expected to fly—
 - (1) Primarily with the unit(s) they support.
- (2) In all types of military aircraft and mission profiles in their units.
- (3) May log up to 12 hours (Active Army) or 6 hours (ARNGUS and USAR) of SFTS time toward accomplishment of annual flying hour requirements. SFTS may not be counted toward the accomplishment of flight pay requirements.

3-11. Operational flying duty orders for flight surgeons

- a. Only TSG; CDR, ARPERCEN (effective 1 Oct 94); or CNGB, will issue orders initiating or terminating flying duty and entitlement for monthly ACIP for flight surgeons. AR 310–10, format 331, will be used for all orders. Entitlement to ACIP for periods of travel, TDY, and leave will be determined according to paragraph 3–9, so long as semi-annual and annual flight surgeon flying minimums are met (DODPM, part two). Orders for flight surgeons will normally qualify them for aviation service and will, in addition, indicate whether or not they are being assigned to operational flying duty (duty AOC 61N).
- b. Normally, all Medical Corps officers who have been awarded AOC 61N, and who meet the requirements in paragraph 3–9, will be placed on flying duty orders. Officers in other positions, not qualifying under paragraph 3–9, are authorized to practice aviation medicine on an occasional or short term substitute basis without being on orders. Those serving more than 2 weeks as a substitute for the regular flight surgeon will be placed on temporary flight status.
- c. Once entered into aviation service, flight surgeons continue in aviation service regardless of duty. However, TSG; CDR, ARPERCEN; or CNGB will issue assignment instructions in the orders that terminate or continue operational flying duty and entitlement to ACIP or upon reassignment to nonoperational flying duty.

Section III Termination

3-12. Reasons for termination

- a. Aviation service orders remain valid between the Active Army and USAR, but become invalid upon entering the ARNGUS. Upon reentry in the Active Army or USAR, the original aeronautical order becomes effective provided the individual submits the appropriate documentation per table 2–3.
- b. A change in officer status (commissioned to warrant or vice versa) terminates aviation service. Another aviation service order is required, whether or not there was a break in service.
 - c. For termination of flight surgeons see paragraph 3-11.
- d. ARNGUS aviators will be terminated from aviation service at the State level using format 331 of AR 310-10. The termination

orders will specify whether or not the individual is entitled to continuous ACIP.

e. If an officer is disqualified from aviation service (paras 3-12a, b, c, d and/or para 5-4) due to a termination resulting from a nonmedical disqualification (no FEB action), the appropriate organization (table 3-5)will publish the aviation service order terminating aviation service.

Table 3–1 Entry into aviation	n service
Authority	Applies to
CG, USAAVNC	Student commissioned or warrant officers en- rolled in the Initial Entry Rotary Wing (IERW) avi- ator course leading to the award of an Army avia- tor aeronautical rating.
	Medical Corps officers when they are enrolled in the U.S. Army School of Aviation Medicine.
CDR, PERSCOM	Aviators who receive interservice transfers to the U.S. Army and aviators recalled for extended active duty.
CNGB	Aviators or flight surgeons who have left active duty or other RCs and become active members of ARNGUS units. ARNGUS officers whose aviation service has been terminated because of medical or nonmedical reasons. Requalification must be verified. Prior service aviators assigned to ARNGUS units who have been awarded aeronautical rating of Army Aviator by PERSCOM. Officers on active duty under the Active Guard Reserve (AGR)program in ARNGUS aviation positions, ARNGUS graduates of IERW training and ARNGUS flight surgeons who have been assigned to ARNGUS units.
CDR, ARPERCEN	Rated USAR officers not on extended Active Duty.
HQDA, TSG	Medical Corps officers attending another military service aviation medicine basic course or a HQDA approved residency program in Aerospace Medicine. Medical students who have graduated from the Army Flight Surgeon Primary Course on appointment in the Medical Corps.

Table 3–2 Aviation Service Entry Date	
Personnel	Aviation Service Entry Date (ASED)
Commissioned officers who attend U.S.flight or aviation medicine course.	The day that military flight training begins.
Warrant Officers who attend a U.S. flight course.	Effective 1 October 1992, the day that military flight training begins. Prior to 1 October 1992, the date a warrant officer graduated military flight training course.
Medical students who graduate from the Aviation Medicine Basic Course.	The day that military flight training begins.

Table 3-3 Gate criteria for continuous ACIP **ASED GATE** Months TOFDC required Continuous ACIP to-Aviators with ASED prior to 791001 12-year gate 18 years of aviation service 72 months or greater 18-year gate 108 months through 131 months 22 years TFOS 25 years TFOS 132 months or greater Aviators with ASED on or after 851001 12-year gate 108 months or greater 18 years of aviation service 18-year gate 120 months through 143 months 22 years TFOS 144 months or greater 25 years TFOS Aviators with ASED from 791001 to As of 911001* 72 months or greater 18 years of aviation service 850930 12-year gate 72 months or greater 15 years of aviation service 15-year gate 108 months or greater 18 years of aviation service 18-year gate 120 months through 143 months 22 years TFOS 144 months or greater 25 years TFOS

Notes:

Note: Warrant officers who pass their 18-year gate (and meet the requirements for continuous ACIP to 25 years TFOS) will be paid continuous ACIP until disqualified, terminated, or retired.

Table 3–4 Flight surgeons annual flying hour minimums				
		Minimum Ho	ours Required	
	Sem	i-Annual	Ar	nnual
Component	Active Army	ARNG/USAR	Active Army	ARNG/USAR
Night	0		10	4
Total	24	12	60	30

Table 3–5 Aviation service termination authority		
Officer Component	Organization	Authority
Aviation Branch Warrant and Medical Service Corps.	Active Army/USAR.	CDR, PERSCOM (TAPC-PLA-A).
Medical Corps (Flight Surgeons)	Active Army.	TSG (Request for termination orders are coordinated through PERSCOM (TAPC-OPH-MC).
	Reserve.	Chief, USAR
All National Guard.	ARNGUS.	CNGB (Termination orders for NGB may be issued at the state level (para 3–11 <i>d</i>)).

Chapter 4 Aeromedical Disqualification

4-1. Disqualification factors

An aeromedical disqualification exists when an officer does not meet the medical fitness standards for flying duties (AR 40–501 and Aeromedical Policy Letter Series).

- a. The date of aeromedical disqualification is the date the aeromedical incapacitation is diagnosed by history, physical examination, or medical testing. The date of aeromedical disqualification may not always correspond with the dates of local medical restriction from flying duties by a flight surgeon using DA Form 4186 (Medical Recommendation for Flying Duty) or the date a flight surgeon first evaluates the aeromedical incapacitation.
 - b. For the purpose of aeromedical disqualification, the immediate

aviation commander is defined as the aviation unit commander or designated official who maintains the officer's flight records.

- c. Aeromedical disqualification requires—
- (1) Temporary medical suspension (para 4-3)or,
- (2) Medical termination from aviation service(para 4-4) or,
- (3) Qualification with an aeromedical waiver(para 4–6).

4-2. Procedures

- a. Officers will report a history of the following conditions to a flight surgeon—
 - (1) Symptoms indicating a change of health.
- (2) Illness requiring the use of medication, visit to a health care provider for evaluation and medical or dental care, restriction to quarters, or hospitalization.

^{*}Only aviators who have accrued 72 months or more TOFDC as of 1 October 1991, are entitled to receive continuous ACIP directly to 18 years of aviation service as long as they remain qualified.If 72 months are not accrued as of 1 October 1991, the 12, 15, and 18-year gate requirements apply.

- (3) Exposure to exogenous factors that might require a restriction from flying duties (AR 40–8).
- (4) Drug or alcohol use that results in driving under the influence or driving while intoxicated (DUI or DWI); positive blood or urine screen; arrests for intoxication, family member abuse, and so forth; psychosocial dysfunction (absence or tardiness from work or school, severe marital discord, and so forth); medical or psychological incapacitation; or history of evaluation or treatment for drug or alcohol misuse, abuse, or dependency.
- b. The immediate aviation commander will request an aeromedical consultation with a local flight surgeon when an officer develops a change in health (para 4-2a(1) through (4), above).
- c. The local flight surgeon will make a preliminary determination of medical fitness for flying duties and recommend full flying duties or duties not to include flying by issuance of DA Form 4186.
- d. In the case of medical disqualification, the CDR, USAAMC, makes the final medical disposition and recommends continuation of aviation service with an aeromedical waiver or medical termination from aviation service.

4-3. Temporary medical suspension

Temporary medical suspension restricting officers from flying duties is required for aeromedical disqualifications that are minor, self-limited, and likely to result in requalification within 180 days.

- a. Temporary medical suspension does not interrupt an officer's—
 - (1) Aviation service.
 - (2) TOFDC if assigned to an operational position.
 - (3) Time credited toward senior or master aeronautical ratings.
 - (4) Entitlement to continuous ACIP.
- b. The immediate commander endorses the date of incapacitation and imposes the temporary medical suspension. An aviation service order for temporary medical suspension is not required.
- c. The local flight surgeon will evaluate officers with a possible medical disqualification as identified by the aviator, immediate commander, flight surgeon, or USAAMC.
- d. The flight surgeon will recommend a date of medical incapacitation on DA Form 4186. The flight surgeon will follow the established standards of aeromedical care (AR 40–501 and Aeromedical Policy Letter Series) and recommend restriction from flying duties on DA Form 4186.
- e. An officer under temporary medical suspension may not be assigned flying duties or operate the flight controls of a military aircraft. As an exception, the flight surgeon may recommend (DA Form 4186) that the officer operate flight simulators, perform ground run-up procedures, and/or undergo an aeromedical in flight evaluation with an instructor pilot (chap 7).
- f. The immediate commander may remove the temporary medical suspension upon favorable recommendation by a flight surgeon on DA Form 4186.
- g. The flight surgeon will recommend medical termination from aviation service if the term of the medical disqualification and/or temporary medical suspension will exceed 180 days. The flight surgeon will notify the immediate commander by DA Form 4186 and forward an Aeromedical Summary to CDR, USAAMC, ATTN: HSXY-AER.
- h. If the officer's term of medical disqualification and/or temporary medical suspension will exceed 180 days, the immediate commander will notify the officer and the servicing FAO in writing, that his ACIP will terminate on the 181st day after the date of medical incapacitation.

4-4. Medical termination

Medical termination from aviation service is required for aeromedical disqualifications that are not likely to result in medical requalification with or without an aeromedical waiver (paras 4–5 and 4–6) within 180 days.

- a. For aviators, medical termination from aviation service results in—
 - (1) Termination of continuous or monthly ACIP.

- (2) Termination of authority to pilot Army aircraft(to include SFTS).
 - (3) Change in PSC from PSC 1 to PSC 2.
- (4) Termination of flying duty credit toward meeting the 12, 15 (if applicable), or 18-year gates.
- (5) Termination of time creditable toward award of a senior or master aviator rating.
- b. For flight surgeons, medical termination from aviation service results in—
 - (1) Termination of monthly ACIP.
- (2) Termination of authority to fly in crewmember status in Army aircraft.
- (3) Termination of time creditable toward award of a senior or master flight surgeon rating.
- c. Medical termination does not result in the loss of aeronautical rating(s), the authority to wear the proper aviation badge, or the authority to function as a flight surgeon (except for flying duties) in support of the Army Aviation Medicine Program.
- d. The local flight surgeon will evaluate the aeromedical disqualification and make a preliminary determination of medical fitness for flying duty. If an officer is found to be medically unfit for flying duty (AR 40–501), he or she will be medically disqualified from aviation service. Medical termination from aviation service begins on the 181st day following the date of medical incapacitation.
- e. The flight surgeon will recommend a medical termination from aviation service on DA Form 4186 and forward the notification to the immediate commander.
- f. The flight surgeon will prepare an Aeromedical Summary and forward it to CDR, USAAMC.
- g. The CDR, USAAMC, will review the medical report and make the final recommendation of medical fitness for flight duty. The CDR, USAAMC will make recommendations to either PERSCOM (TAPC-PLT-A and TAPC-OPH-MC), OTSG, or NGB (NGB-AVN-OC)and recommend the following—
 - (1) Date of aeromedical incapacitation.
 - (2) Final aeromedical disposition such as—
 - (a) Qualification without a waiver, or;
 - (b) Qualification with an aeromedical waiver, or;
 - (c) Medical termination from aviation service.
- *h.* CDR, PERSCOM (TAPC-PLT and TAPC-OPH-MC), or CNGB (NGB-AVN-OC) will establish the date of medical termination from aviation service and publish an order (AR 310–10 format 331) disqualifying the officer.
- i. The appropriate personnel career division will reclassify or rebranch the officer from aviation service if warranted.

4-5. Medical requalification after medical termination from aviation service

A flight surgeon may recommend to CDR, USAAMC, by an aeromedical summary that an aviator who has been medically terminated from aviation service be requalified with or without an aeromedical waiver. If USAAMC concurs, a recommendation requesting requalification for aviation service will be forwarded to PERSCOM (TAPC-PLT-A and TAPC-OPH-MC) or NGB (NGB-AVN-OC). If the recommendation is approved, an order requalifying the officer for aviation service will be published.

4-6. Aeromedical waivers

- a. Medically disqualified officers may be evaluated by a flight surgeon for consideration of qualification for aviation service with an aeromedical waiver. The flight surgeon will submit an aeromedical summary to CDR, USAAMC, who will make the final recommendation of medical fitness for flying duty to CDR, PERSCOM(TAPC-PLT-A and TAPC-OPH-MC)or CNGB for approval. If a waiver is granted, an order qualifying the officer for aviation service with an aeromedical waiver will be published.
- b. Officers medically terminated from aviation service may not be issued a recommendation by a flight surgeon for full flying duties (DA Form 4186) until receipt of aeromedical waiver orders from the waiver authority. Officers not medically terminated from

aviation service may be issued a recommendation by a flight surgeon (on DA Form 4186) for temporary full flying duties pending receipt of waiver. Complex or questionable cases will be discussed with the CDR, USAAMC, ATTN:HSXY-AER, Ft. Rucker, AL 36362–5333, DSN:558–7430 or COMM: (205) 255–7430, before recommending flying duties on DA Form 4186.

- c. When no longer justified by either medical condition or Army requirements, medical waivers may be terminated by CDR, PERSCOM, TSG, or CNGB, as appropriate.
- d. If the appropriate authority (table 3–5)determines that the disabling condition cannot be waived, the officer will be medically terminated from aviation service. An order terminating the officer from aviation service will then be published by the appropriate authority(table 3–5).

Chapter 5 Nonmedical Disqualification

5-1. Condition for nonmedical disqualification

A nonmedical disqualification condition exists when an officer does not meet one or more of the standards for flying duties (para 6–1). When an officer is no longer professionally qualified for aviation service, he or she is disqualified from further aviation service.

5-2. Nonmedical suspension

Any commander in the chain of command may impose a nonmedical suspension. The commander must determine whether the officer is unfit for flying duty because of one or more of the conditions in paragraph 6–1.

5–3. Nonmedical suspension pending a Flying Evaluation Board

- a. Conditions. A temporary suspension is mandatory when a commander intends to request a FEB. A suspension will never be ordered as a disciplinary measure. Violations of flying or other regulations may be corrected by using judicial, nonjudicial or administrative measures.
- b. Suspension authority. Suspension authority is listed in table 5-1.
- c. Notice of suspension. The commander imposing a suspension will inform the officer and servicing FAO *in writing* of the effective date the ACIP will be suspended. The suspended officer will promptly acknowledge the suspension *in writing*.
- d. Duty while suspended. While suspended, an officer will not be assigned to flying duties. A suspended officer may not perform crew duties in a military aircraft or flight simulator until restored to flying duty.
- e. Action in case of reassignment orders. If reassignment orders or instructions are received for an officer being considered for suspension or awaiting final decision on a suspension, the unit commander will inform the officer's career management branch within 10 days of receipt of orders to ensure he or she cannot be reassigned. (For Reserve officers reassigned from troop program units to an ARPERCEN Control Group, inform CDR, ARPERCEN (ARPC–OPC–AV). The unit commander and CDR, PERSCOM, will not allow a suspended officer to be reassigned prior to final action being completed.
 - f. Removal of suspension (restoration).
- (1) Any commander authorized to impose a temporary suspension may remove the suspension, restore the officer to aviation service, and retroactively reestablish the ACIP.
- (2) If an FEB recommends reinstatement and the approving authority concurs, the approving authority will remove the temporary suspension, restore the officer to flying duty, and retroactively reestablish the ACIP.Such action must be taken within 180 days of the original temporary suspension.

5-4. Nonmedical disqualification not requiring Flying Evaluation Board action

- a. Under certain conditions, an officer may request waiver of the FEB and voluntary disqualification. Such a request may only be approved when such action is clearly in the Army's best interest. Prior to waiving the FEB and requesting voluntary disqualification, the officer shall be given an opportunity to consult with legal counsel. The officer must state in the written request for waiver of the FEB and voluntary disqualification, whether he or she has consulted with counsel and if not, whether he or she waives his or her right to consult with counsel. The FEB appointing authority will submit all supporting documents with the request for waiver to the FEB waiver authorities listed in table 3–5.
- (1) Unless there are unusual or compelling reasons, an officer will not be granted a voluntary disqualification if—
- (a) The officer has not completed an active duty service commitment incurred because of initial entry or graduate flight training, or post graduate medical training in aviation medicine (exceptions to policy will be evaluated on a case-by-case basis).
- (b) The officer has accepted assignment to or is enrolled in a formal graduate flight or aviation medicine training course.
- (2) For (1) above, the following are not unusual or compelling reasons—
- (a) A personal desire not to incur an active duty service commitment for a permanent change of station(PCS) or formal graduate flight training course.
 - (b) A refusal to fly a certain type of aircraft.
 - (c) A refusal to perform a particular mission.
 - (d) A refusal to fly in a certain location.
- (3) Requirements for submitting a DA Form 4187 are outlined below—
- (a) The officer must submit a DA Form 4187 to his or her immediate commander requesting voluntary disqualification. The statement..."I understand that if this request is approved, I will be permanently disqualified for aviation service."...will be added to section IV (Remarks) of the DA 4187.
- (b) If the immediate commander recommends the request be approved, the officer will be temporarily suspended from flying duty pending final action (para 5-3c through e).
- (c) The voluntary request and supporting documents are sent through the chain of command to the appropriate approval authority (table 3–5). Authorities at any level within the chain of command may disapprove the request, return it to the officer, and, if proper, direct the commander to remove the temporary suspension. The FEB appointing authority (para 5-3b) reviews the request and prepares a recommendation. The aviation service order that permanently disqualifies the officer from aviation service will be published by the appropriate approval authority in table 3-5.
- (d) Submitting a voluntary request may not be used as the sole basis for other administrative or disciplinary actions. This does not preclude proper action if material in the request so warrants. Examples are admitting a violation of law or directive or professing a fear of flying.
- b. An officer may request branch transfer, single track, or a change in their AOC or MOS. In this case,(1) through (3) above do not apply. The proper career management division will review the application and consider individual qualifications and Army requirements and provide comments. If approved, the appropriate authority (table 3–5) will publish the permanent disqualifying aviation service order.
- c. Actions resulting in civilian convictions and/or under the UCMJ may be grounds for nonmedical permanent disqualification under this paragraph. The commander will submit a memorandum requesting a nonmedical disqualification based on conviction through command channels to the appropriate authority (table 3–5). Supporting documents (courts-martial results, and so forth) are required with the memorandum.

5-5. Nonmedical termination

Nonmedical termination from aviation service is required for disqualifications as a result of an FEB or voluntary disqualification.

- a. For aviators, nonmedical termination results in-
- (1) Termination of continuous or monthly ACIP.
- (2) Termination of authority to pilot Army aircraft and SFTS.
- (3) Change in PSC from PSC 1 to PSC 3.
- (4) Termination of flying duty credit toward meeting the 12, 15 (if applicable) or 18-year gates.
- (5) Termination of time creditable toward award of a senior or master aviator rating.
- b. For flight surgeons, nonmedical termination from aviation service results in-
 - (1) Termination of monthly ACIP.
- (2) Termination of authority to fly in crewmember status in Army aircraft.
- (3) Termination of time creditable toward award of a senior or master flight surgeon rating.
 - (4) Termination of the authority to perform flight surgeon duties.
- c. Nonmedical termination may result in the loss of aeronautical rating(s) or the authority to wear a properly awarded aviation badge (para 2-1c(1)).

5-6. Requalification

- a. Officers may request requalification and restoration of aviation service when the original reason(s) for the disqualification no longer exists (table 2-4). Termination authorities listed in table 3-5 may approve requalification and restoration, based on the best interests of the Army and the needs of the officer at the time of the request.
- b. Officers formerly rated as USAF pilots or Army or Naval (USN, USMC, USCG) aviators called or recalled to active duty may request aviation service orders and the proper OPMS specialty code or warrant officer PMOS (table 2-4).
- c. If the request is approved, a copy of the aviation service requalification order will become a permanent part of the officer's—

 - (2) Field Military Personnel Records Jacket.
 - (3) Individual Flight Records Folder.
 - (4) OMPF.
- d. An officer who requests voluntary disqualification will be permanently disqualified and not eligible for requalification. Officers who request branch transfer, single-track, or a change in their AOC are not eligible for requalification.
- e. An officer who was involuntarily disqualified due to incarceration as a result of judicial action is permanently disqualified, and not eligible for requalification.

Table 5-1

Suspension authority Action and length of suspension Any commander in the chain-May impose and remove a temporaray of-command. suspension for up to 30 days. CGs of the Active Army. CG, May appoint an FEB and impose a temporary suspension for up to 180 days. This suspension runs concurrent with any 30 day suspension already

USARC; CGs, ARCOMs/ GOCOMS; CDR, ARPER-CEN; CNGB; and commanders of posts, camps, forts, or stations. Army commanders of divisions, brigades, regiments, detached battalions or corresponding units of the Ar-

imposed.If final fitness has not been determined by the end of 180 days, the appointing authority may request an extension from the approving authority or in the case of ARNGUS aviators from CNGB. The request will include the reason for delay and the expected completion date.

Chapter 6 Flying Evaluation Board

6-1. Standards

Each officer authorized to pilot a military aircraft or perform crewmember duties must maintain the highest professional standards. When an officer's performance is doubtful, justification for continued aviation service or authorization to pilot Army aircraft is subject to a complete review.

- a. When the FEB should convene. An FEB should be convened if an officer-
 - (1) Fails to remain professionally qualified.
 - (2) Has marginal potential for continued aviation service.
- (3) Is currently nonmedically disqualified for aviation service and meets the provisions for regualification(para 6-6).
- b. Appointing authority. An FEB may be appointed by officers holding 180-day suspension authority in table 5-1.
- c. Reasons for an FEB to convene. An FEB will be convened for the following reasons-
 - (1) Lack of proficiency. Evidence that shows the officer—
 - (a) Lacked proficiency in flying duties.
- (b) Failed to meet ATP requirements (proficiency, flying hour task iterations and APART) unless waived(AR 95-3).
- (c) Failed to maintain a current instrument qualification unless exempt or waived under the proper regulation or aircrew training manual (does not apply to flight surgeons).
- (2) Failure to maintain medical certification. All officers, regardless of component or whether or not assigned to operational flying duty assignments must maintain medical certification for flying duty through timely physical examinations (AR 40-501). If the certification expires, the officer is unfit until medically requalified or a temporary medical extension is provided. Aviation service is suspended effective the day following the last day of his or her birth month. In cases where temporary medical extension has been provided, aviation service is suspended on the first day following the last day of the extension. The immediate commander will temporarily suspend the officer from flying duty.
- (a) If not physically examined and medically recertified within 180 days following the date of suspension, the proper appointing authority will convene an FEB.
- (b) If the officer is given a physical examination within 6 months of suspension and the examination shows that the officer is unfit and will not be fit by the 181st day following suspension, the flight surgeon will inform the commander and USAAMC. USAAMC will act on the medical report. If disqualification is recommended, CDR, PERSCOM or CNGB will publish an aviation service order disqualifying the officer from aviation service. The effective date of this action will be the 181st day following suspension.
- (c) Officers must plan for timely completion of their physical examination and medical recertification. They must consider additional time for processing medical waivers. When an officer is stationed in a remote area and only limited facilities are available, or when other unexpected circumstances prevent a timely physical examination and medical recertification, an officer may request extension of eligibility up to 6 months as an exception. The officer will send a memorandum through his or her commander to the FEB appointing authority. The FEB appointing authority approves or disapproves the request. For other guidance, contact the appropriate organization (para 3–11e).
- (3) Flagrant violation of flying regulations. This may show a lack of judgment or proficiency that renders the officer unfit or unqualified to perform flying duties.
- (4) Undesirable habits or traits of character. Evidence that shows the officer is emotionally unstable or has inherent undesirable personality traits that may affect the officer's duties as an aviation officer. These traits include, but not limited to—alcohol abuse; illegal use of hallucinogenic, narcotic, federally controlled drugs and substances; incarceration as a result of judicial action; or willful concealment of disqualifying medical history.
 - (5) Urinalysis testing. Failure to comply with urinalysis testing

requirements or positive urinalysis results for controlled or illegal substance.

- (6) Unsatisfactory duty performance. Evidence shows that an officer's overall duty performance is unsatisfactory. This may result from performance in and out of the aircraft and may be the result of lack of motivation, improper attitudes, or inability to perform duties of an aviation officer. The individual's overall demonstrated performance as an aviation officer is to be considered and a judgment made as to whether the facts are such that he or she should be removed from continued aviation service.
- (7) Insufficient motivation. Lack of motivation is any self-imposed deficiency not covered under medical unfitness in AR 40-501(for example, apathy or fear of flying not because of psychiatric illness) that limits the duty or location to which an officer may be assigned. The underlying cause may, but need not, be determined. Insufficient motivation may be proven by unjustified deficient conduct, such as refusing to fly a specific aircraft or category, type, or model of aircraft, or refusing to fly certain missions or in a particular theater of operations, combat, or otherwise. This should not be confused with valid safety concerns. This paragraph does not preclude a commander from taking any proper measures, to include action under UCMJ, if the commander determines or suspects such measures may be warranted by the officer's conduct. When a commander discovers a self-imposed deficiency on the part of an officer such as a profession of "fear of flying," the following action must be taken by the commander-
 - (a) Suspend the officer.
- (b) Require the officer to have a flying duty medical examination (AR 40–501). The examining physician will determine if any disabling physical or psychiatric conditions exist. If the determination of medical fitness for flying is made, the report will be returned to the commander who should consider what action under UCMJ would be appropriate, if any. If the aviator is medically unfit, the flight surgeon will notify the commander of the duration and severity of the condition. The flight surgeon will also notify USAAMC.
- (8) Request to appear before an FEB. When an officer submits a written request to appear before an FEB to his or her commander. The commander will send the request, with recommendations, to the nearest FEB appointing authority.
- d. FEB functions and duties are administrative. The FEB does not make recommendations on disciplinary actions. The conduct of the FEB will be guided by AR 15–6 and this regulation. When AR 15–6 and this regulation conflict, the guidance found in this regulation will prevail.
- e. Approving authority. An FEB report will be approved by the approving authority. This is the lowest level commander with General Courts Martial Convening Authority (GCMCA). If the appointing authority exercises such judgment, approval authority may be exercised at that level. For ARNGUS, the only FEB approving authority is Chief, NGB.
- f. Reviewing authority. An FEB may be reviewed prior to approval by the approving authority. Reviewing authorities will be in the chain of command between the appointing and approving authorities. If none exist, the approving authority may also exercise review authority.

6-2. Membership

The membership of an FEB will be according to AR 15-6. In addition—

- a. Each board will consist of an uneven number of voting members (no fewer than three) who are rated commissioned and commissioned warrant officers.
- b. The board may include a flight surgeon as a nonvoting, advisory member when a medical problem could interfere with the officer's duty performance.
- c. If the respondent is a flight surgeon, one voting member will be a flight surgeon.
- d. A nonvoting legal advisor may be appointed to the board (AR 15-6, para 5-1d).

- e. If the respondent is a WO, at least one voting board member will be a WO, senior in grade to the respondent.
- f. National Guard boards may include a rated officer from the U.S. Army Advisory Group to the ARNGUS of a State.
- g. The DA Form 1574 (Report of Proceedings by Investigation Officer/Board of Officers) will show board membership, the voting members aeronautical ratings, and branch code/AOC or PMOS.

6-3. Procedures

The objective of the FEB is to ensure that all information relevant to a person's qualifications is presented and that the proceedings are objectively evaluated.

- a. The board receives exhibits and hears testimony in open session, witnesses are sworn in and subject to cross examination, and the respondent may be represented by counsel. The respondent may choose to do one of the following—
- (1) Request military legal counsel of the respondent's choice. The rating official of the military counsel will determine availability of the counsel on the basis of workload, distance to be traveled, expected length of the hearing, and manning.
 - (2) Request military legal counsel be assigned.
- (3) Hire civilian attorney of the respondent's choice at own expense.
 - (4) Decline legal counsel.
- b. The formal board will be held according to AR 15–6. Informal conversation or comments, statements off the record," and reference to other matters will be avoided. In this regard, care should be taken that extracts or attachments from safety investigation reports will not be considered as evidence by board members. The board members discuss and evaluate the evidence and develop recommendations in closed session. Findings and recommendations are announced in open session before the board adjourns.
- c. Findings and recommendations of the board will be according to AR 15-6, chapter 3, section II. Recommendations are restricted to the following—
- (1) Officers with proper training and skills be awarded an aeronautical rating.
- (2) Orders suspending the respondent from flying be rescinded and respondent be restored to aviation service. When aviation operations or the flying ability of the respondent can be improved, other recommendations may be made.
- (3) Orders disqualifying the respondent be rescinded and the respondent be requalified for aviation service.
 - (4) Respondent be disqualified from aviation service.
- (5) Respondent be permanently disqualified from aviation service
- (6) Respondent be permanently disqualified from aviation service and no longer authorized to wear the Army Aviation Badge (para 2-1c(1)).
- d. Recommendation guidance. The FEB will base its recommendations on the findings. Recommendations must clearly and logically address the respondent's potential for service as an officer in active flying service. The findings will be reviewed for legal sufficiency by the servicing legal advisor before being submitted to the appointing authority. Recommendations will be made using the following guidelines—
- (1) Recommendations to disqualify an officer are normally not made on the basis of an isolated incident or action. However, if an officer clearly shows a dangerous or an unacceptable change in pattern of performance, disqualification should be recommended.
- (2) The board must consider the officer's ability and potential to perform basic military flying duties and, when applicable, the potential for more complex skills after more training and flying experience.
- (3) Officers having marginal potential for continued aviation service should be recommended for disqualification.
- (4) In the final analysis, the best interest of the Army remains the prime criterion in evaluating each case.
- e. When the appointing or a higher reviewing authority believes disqualifying the officer is proper, the report will be sent through

command channels to the next higher reviewing authority for review.

- f. The appointing or any higher reviewing authority may take final action on the board proceedings when such action restores aviation service provided the aviator has not been previously disqualified. Authorities listed in table 3–5 will issue aviation service orders restoring the aviator once the approved FEB proceedings are received.
- g. If flying requirements are waived or time extended for instrument renewal and qualifying the officer and restoring him to flying duty are recommended, the appointing authority may restore the officer, however, a request for waiver or extension of time in excess of 30 days must be sent to the MACOM (AR 95–3).
- h. When all reviewers recommend disqualification, and when the FEB appointing authority believes disqualification or permanent disqualification is proper, final action will be taken by the approving authority.
- *i.* Preparation and disposition of report proceedings are according to AR 15–6. If the approving authority approves the findings and recommendations, he or she will retain the copy of the report for 1 year. When final action is taken, the original will be sent to the appropriate termination authority (table 3–5), to be filed permanently in the respondent's OMPF (restricted fiche) and according to AR 600–8–104 for preparation of orders.

6-4. Appeals

On the basis of other additional evidence or new unexpected circumstances, a respondent may request the MACOM commander to reconsider the approving authority's decision. Appeals (complete with a copy of the disqualifying FEB) must be sent through the same channels as the FEB with each intermediate command recommendation.CDR, PERSCOM or CNGB, as appropriate, will consider all appeals for officers not assigned to MACOMs. Once the appellate authority has acted on an appeal, it will not be considered further. Cases that are acted on favorably will be sent to the appropriate authority(table 3–5) for the preparation of orders.

6-5. Time phasing

FEBs will be processed according to the conditions below. If a report is late, a written justification must be included.

- a. The president of the board must convene the FEB within 30 days of his or her appointment.
- b. The president of the board should complete and send a report of the proceedings to the appointing authority within 30 days from the convening date.
- c. The respondent or respondent's counsel will have 10 days from receiving the report proceedings to review them and submit a brief to the appointing authority.
- d. The appointing authority must take final action on the case or send a report of the proceedings to the next higher reviewing authority within 15 days.
- e. The respondent or respondent's counsel has 60 days following the notice of final action (from the approving authority) in which to file an appeal.
- f. The appointing authority will request an extension from the appropriate authority (table 3–5)when it is apparent that final action will not be completed within 6 months from the initial date of suspension.

6-6. Requalification

- a. Officers may seek requalification and restoration of aviation service when the original reason(s) for the disqualification and current circumstances warrant reconsideration. An FEB will be convened to review the officer's request for requalification. Approval authority for cases of requalification will be retained by the appropriate approval authority (table 3–5)and will be based on the best interests of the Army and the needs of the officer.
 - b. Disqualification resulting from FEB action.
- (1) Evaluation for requalification. An officer disqualified as the result of an FEB review may be evaluated for requalification if—

- (a) The officer was not permanently disqualified for aviation service.
- (b) The officer's authority to wear the aviator or flight surgeon badge was not revoked as a result of an FEB recommendation (AR 672–5–1, para 1–29).
 - (2) Procedures for regualification.
- (a) The officer will write his or her immediate commander to request requalification.
- (b) The officer's immediate commander must endorse the requalification request, with a recommendation, through proper channels to the FEB appointing authority. The appointing authority may convene an FEB to evaluate the officer's qualifications for return to aviation service.

6-7. Aviation service orders

- a. If the approving authority decides in favor of the FEB recommendation that the officer be disqualified from aviation service, the appropriate authority (table 3–5) will publish aviation service orders terminating aviation service.
- b. All approved FEB proceedings (restoration or disqualification) will be forwarded through the MACOM to the appropriate authority (table 3–5).A copy of the proceedings will be included in the officer's CMIF and OMPF.
- c. When an approved FEB restores an officer to aviation service who was previously disqualified through FEB proceedings, the appropriate authority(table 3–5) will, subject to Army requirements, publish the order.

Chapter 7 Aeromedical Consultation and In-Flight Evaluation

7-1. Applicability

This chapter-

- a. Prescribes responsibilities and procedures for conducting Aeromedical Consultation and In-flight Evaluations (ACIEs) for Army officers whose physical condition precludes their meeting class 2 or 2F (flight surgeons) medical standards of fitness for flying duties.
 - b. Concerns all aircrewmembers who-
- (1) Have been medically disqualified or medically terminated from aviation service for a medical condition that renders them unfit for retention in aviation service(AR 40–501).
- (2) Possess a capability for flying duty, with possible restrictions, as determined by the flight surgeon.
- (3) Meet a valid Army requirement for a particular grade and specialty.
- (4) Are appropriate candidates for possible return to aviation service and whose evaluation may contribute substantive aeromedical knowledge and thereby enhance Army aviation and the practice of aviation medicine.

7-2. Responsibilities

- a. Flight surgeon. Any flight surgeon may request an ACIE for a medically disqualified or medically terminated Army aviator. In cases where disagreement exists, CDR, USAAMC, will make final determination on the need for further evaluation.
- b. Commander of medical facility. The commander of a medical facility will send the ACIE request and the officer's health record jacket to CDR, USAAMC. For ARNGUS aviators and flight surgeons, send the request through CNGB to CDR, USAAMC.
- c. CDR, USAAMC, through U.S. Army Aeromedical Activity. CDR, USAAMC, through U.S. Army Aeromedical Activity will—
- (1) Review the request for the ACIE, the aeromedical summary, the officer's health record jacket, and decide if further evaluation is needed.
- (2) When required, coordinate to schedule aircraft and instructor pilot requirements with the CG, USAAVNC.
 - (3) Coordinate specific Army personnel or locations for medical

or in-flight evaluation and issue of temporary aviation service orders, as required.

- (4) Authorize and coordinate the use of Air Force and Navy consultation services, as required.
- (5) When necessary, coordinate with OTSG, PERSCOM, USARC, or NGB concerning evaluations and TDY fund cites(para 7-6).
- (6) Inform the proper flight surgeon and aviator's unit commander of the inclusive dates of the evaluation.
- (7) Review the findings and recommendations of the ACIE, and approve or disapprove recommendations.
- (8) Send the formal report, with recommendations, to the appropriate organization (table 3–5).
- d. CDR, PERSCOM, CDR, USARC, or CNGB. CDR, PERSCOM, CDR, USARC, or CNGB will—
- (1) Determine whether returning the aviator or flight surgeon to aviation service with a waiver meets Army requirements.
 - (2) Inform USAAMC when service needs exist.
- (3) When required, issue a temporary aviation service order and TDY orders for the inclusive dates of the evaluation. Amend or revoke the aviation service order if appropriate.
- (4) Determine if the officer is qualified for aviation service after the evaluation report is received. Amend or revoke the aviation service order as appropriate.
- (5) Issue assignment and travel orders for those aviators and flight surgeons returned to aviation service.

7-3. Procedures for in-flight demonstration capability

- a. Aviators will—
- (1) Present a copy of their most recent DA Form 759 to USAAMC personnel.
- (2) Demonstrate their ability to safely perform all the normal and emergency functions involved with piloting the aircraft in which qualified. This demonstration will include ability to preflight the aircraft as well as perform all flight maneuvers.
 - b. A qualified instructor pilot will—
 - (1) Accompany the aviator during flight demonstrations.
 - (2) Evaluate the aviator's performance.
- (3) Provide a written report to CDR, USAAMC. The report will reflect the performance capabilities and limits, if any, of the aviator in each type of aircraft flown. It will also contain comments on the ability of the aviator to operate the aircraft safely and efficiently.
 - (4) Provide the aviator a copy of the findings.
 - c. A flight surgeon will-
- (1) Accompany the aviator in all aircraft that can accommodate the flight surgeon.
- (2) Evaluate the aviator's restrictions to physical in-flight requirements and psycho-physiologic stresses.
 - (3) Provide a report of the findings to the aviator.
 - (4) Provide USAAMC a written report of the findings.

7-4. Aeromedical consultation service

The data provided by the flight surgeon and the instructor pilot are combined and submitted in the form of an aeromedical summary. This summary is reviewed by the Aeromedical Consultation Service (ACS)in the U.S. Aeromedical Activity, USAAMC. Selected cases may be forwarded to the Aeromedical Consultant Advisory Panel (ACAP) for review. ACAP consists of aeromedical specialists appointed by the CDR, USAAMC, and experienced aviators appointed by the CG, USAAVNC.After the summary is reviewed, the ACS will make recommendations concerning the officer's fitness to perform flying duties safely and efficiently. The ACS will indicate if a reevaluation is required at a later date and state the time interval for the reevaluation. The panel will provide their conclusions, recommendations, and aeromedical summary to the CDR, USAAMC, who will make the final determination of medical fitness for flying duties and send them to the appropriate authority (table 3-5) for final action.

7-5. Temporary aviation service orders

USAAMC will coordinate with PERSCOM, ARPERCEN and NGB, as applicable, to issue temporary aviation service orders. These orders will define the limits imposed on the aviator for the evaluation. Such orders will terminate on the specified date, at which time the aviator will revert to the previously existing suspension or disqualified status pending final decision of the case.

7-6. Travel orders

The unit commander will contact CDR, USAAMC for travel details and will coordinate publication of the travel order with the unit's servicing military personnel activity (MPA).

- a. When possible, commanders will request transportation on USAF aircraft through aeromedical evacuation channels.
- b. Normally, TDY funding is the responsibility of the officer's unit. The servicing MPA will issue the officer travel orders indicating temporary duty to the USAAMC medical company for purposes of an ACIE.
- c. For ARNGUS aviators, funding and orders will be the responsibility of the State Adjudant's General.

7-7. Distribution of the final Aeromedical Consultation Inflight Evaluation Report

The ACIE report will be distributed as follows-

- a. One copy for the aviator's medical record.
- b. One copy for the U.S. Army Health Professional Support Agency (SGPS-CP-B).
 - c. One copy to the appropriate authority as indicated in table 3–5.
 - d. One copy for CDR, USAAMC.
 - e. One copy to the officer.

Appendix A References

Section I Required Publications

AR 15-6

Procedures for Investigating Officers and Boards of Officers. (Cited in paras 1–1, 6–1,6–2 and 6–3.)

AR 40-501

Standards of Medical Fitness. (Cited in paras 3-1, 4-1, 4-3, 4-4 and 7-1.)

AR 95-1

Army Aviation: Flight Regulations. (Cited in table 2–2.)

AR 95-3

Aviation: General Provisions, Training, Standardization, and Resource Management. (Cited in para 6–1.)

Section II

Related Publications

A related publication is merely a source of additional information. The user does not have to read it to understand this publication.

AR 40-8

Temporary Flying Restrictions Due to Exogenous Factors

AR 40-66

Medical Record Administration

AR 135-100

Appointment of Commissioned and Warrant Officers of the Army (Reserve Component Personnel Update)

AR 135-210

Order to Active Duty as Individuals During Peacetime(Reserve Component Personnel Update)

AR 310-10

Military Orders

AR 570-4

Manpower Management

AR 614-100

Officer Assignment Policies, Details, and Transfers

AR 614-120

Interservice Transfer of Army Commissioned Officers on the Active Duty List

AR 616-110

Selection, Training, Utilization and Career Guidance for Army Medical Corps Officers as Flight Surgeons

AR 672-5-1

Military Awards

Misc Pub 13-1

Department of Defense Military Pay and Allowances Entitlements Manual

DA Pam 600-3

Commissioned Officer Professional Development and Utilization (Officer Ranks Update)

DA Pam 600-11

Warrant Officer Professional Development (Officer Ranks Update)

Aircrew Training Manual

Aviation Career Incentive Act of 1974 (ACIA-89)

Executive Order 11180, USA 3691 and 37 USC 301a

NGR 600-105

Aviation Service of Rated Army Officers

Uniform Code of Military Justice, Article 31

Section III

Prescribed Forms

This section contains no entries.

Section IV

Referenced Forms

DA Form 2

Personnel Qualification Record - Part I

DA Form 759

Individual Flight Record and Flight Certificate- Army

DA Form 1574

Report of Procedings by Investigating Officers/Board of Officers

DA Form 4186

Medical Recommendation for Flying Duty

DA Form 4187

Personnel Action

Appendix B List of Addresses

Director of Manpower

Office of the Deputy Chief of Staff for Personnel

ATTN: DAPE–MBI–CA 300 Army Pentagon

Washington, DC 20310-0300

Commander, U.S. Total Army Personnel Command

ATTN: TAPC-PLA-A

Aviation Management and Incentive Pays Branch

200 Stovall Street

Alexandria, VA 22332-0406

Commander, U.S. Total Army Personnel Command

ATTN: TAPC-OPH-MC Health Services Division

200 Stovall Street

Alexandria, VA 22332-0417

Commander, U.S. Army Reserve Personnel Center

ATTN: ARPC-OPC-AV 9700 Page Boulevard St Louis, MO 63132-5200

Commander, U.S. Army Aeromedical Center

ATTN: HSXY-AER

Fort Rucker, AL 36362-5333

Chief, National Guard Bureau Army Aviation Directorate ATTN: NGB-AVN-OC III South George Mason Arlington, VA 22204-1382

Commander, U.S. Army Health Professional Support Agency

ATTN: SGPS-CP-B Leesburg Pike

Falls Church, VA 22041-3258

Commander, U.S. Army Reserve Command ATTN: AFRC-AV 3800 North Camp Creek Parkway Atlanta, GA 30331-5099

Director, Full Time Support Management Center ATTN: DARP-ARO-P 1850 Craigshire Plaza St Louis, MO 63146-6906 **Glossary**

Section I Abbreviations

ABCMR

Army Board for Correction of Military Records

AC

Active Component

ACAP

Aeromedical Consultant Advisory Panel

ACIA-74

Aviation Career Incentive Act of 1974

ACIA-89

Aviation Career Improvement Act of 1989

ACIE

Aeromedical Consultation and In-flight Evaluation

ACIP

Aviation Career Incentive Pay

ACS

Aeromedical Consultation Service

AERS

Army education requirements schooling

AGR

Active Guard Reserve

AOC

area of concentration

APART

Annual Proficiency and Readiness Test

ARCOM

United States Army Reserve Command

ARNGUS

Army National Guard of the United States

ARPERCEN

U.S. Army Reserve Personnel Center

ARSTAF

Army Staff

ASED

aviation service entry date

ATM

Aircrew Training Manual

ATP

Aircrew Training Program

BC

branch code

CDR

commander

CG

commanding general

CMIF

career management individual file

CMS

combat mission simulator

CNGB

Chief, National Guard Bureau

CONUS

continental United States

CONUSA

the numbered armies in the continental United States

DCSOPS

Deputy Chief of Staff for Operations and Plans

DCSPER

Deputy Chief of Staff for Personnel

DODFMR

Department of Defense Financial Management Regulation

FAA

Federal Aviation Administration

FAO

finance and accounting office

FEB

Flying Evaluation Board

FOA

field operating agency

FTCMC

Full Time Support Management Center

FW

fixed wing

CCM

general courts martial

GOCOM

General Officer Command

HODA

Headquarters, Department of the Army

IATF

individual aviation training folder

IERW

initial entry rotary wing

IFRF

individual flight records folder

IRR

Individual Ready Reserve

JAG

Judge Advocate General

MACOM

major Army command

MPA

military personnel activity

NGB

National Guard Bureau

OMPF

official military personnel file

OPMS

Officer Personnel Management System

ORWAC

Officer and Warrant Officer Rotary Wing Aviator Course

OTSG

Office of the Surgeon General

PCS

permanent change of station

PERSCOM

U.S. Total Army Personnel Command

PMOS

primary military occupational specialty

PSC

pilot status code

RC

Reserve Component

POTC

Reserve Officer Training Corps

RW

rotary wing

RWQC

rotary wing qualification course

SA

Secretary of the Army

SFTS

synthetic flight training system

SIDPERS

Standard Installation/Division Personnel

System

TDA

table of distribution and allowances

TDY

temporary duty

TFOS

Total Federal Officer Service

TOFDC

total operational flying duty credit

TPU

troop program unit

TSG

The Surgeon General

UCMJ

Uniform Code of Military Justice

USAAMC

U.S. Army Aeromedical Center

USAAVNC

U.S. Army Aviation Center

USAF

U.S. Air Force

USAR

U.S. Army Reserve

USARC

U.S. Army Reserve Command

USCG

U.S. Coast Guard

USMA

U.S. Military Academy

USMC

U.S. Marine Corps

USN

U.S. Navy

WOC

Warrant Officer Candidate

Section II Terms

Active Army

The Active Army consists of (1) Regular Army soldiers on active duty; (2) Army National Guard of the United States and Army Reserve soldiers on active duty (other than for training or in an Active Guard Reserve status); (3) Army National Guard soldiers in the service of the United States pursuant to a call; and (4) all persons appointed, enlisted, or inducted into the Army without component.

$\label{lem:consultation} \begin{tabular}{ll} Aeromedical consultation and in-flight \\ evaluation(ACIE) \end{tabular}$

A complete clinical and/or in-flight examination to determine if experienced Army aviators or flight surgeons with a disqualifying injury, disease, or physical condition can return to flying duties without danger to themselves or the aviation safety environment.

Aeromedical physician assistant

A physician assistant who has completed an approved medical training program and has graduated from an approved military course in aviation medicine.

Aeronautical order

A published notice by proper authority to—

- a. Qualify or disqualify an officer for aviation service.
- b. Begin or terminate entitlement to Aviation Career Incentive Pay.
- c. Award or revoke an aeronautical rating and badge.

Aeronautical rating

One of several qualifications awarded to officers. A rating certifies successful completion of prescribed aviation related training or equivalent experience. Current U.S. Army aeronautical ratings are Army aviator, senior Army aviator, master Army aviator, flight surgeon, senior flight surgeon, and master flight surgeon.

Army aviator

Officers who have been awarded an Army aeronautical rating. This does not include flight surgeons.

Aviation Career Incentive Act of 1974

An enactment of Congress that converted military flight pay from a hazardous duty to a career incentive pay system. This act prescribes the compensation procedures for rated officers who are in aviation service on a career basis.

Aviation Career Improvement Act of 1989

An enactment of Congress that revised the military flight pay and its entitlement criteria.

Aviation"gates"

The two steps (12th and 18th year computed from the ASED) in an officer's aviation service used to determine further entitlement to continuous incentive pay. Some officers have a 15th year transition gate that applies to them according to ACIA–89. Gates do not apply to flight surgeons who follow monthly ACIP rules.

Aviation service

Service performed by an officer who has or is training for an aeronautical rating. Aviation service continues without interruption until the officer is disqualified or administratively terminated from aviation service.

Commissioned officer

Commissioned officers in the grade of 2LT and higher and commissioned warrant officers in the grade of CW2 and higher.

Continuous incentive pay

Pay authorized to aviators, regardless of current duty assignment, continuous by each month, who meet the operational flying requirements.

FEB appointing authority

The officer authorized to convene an FEB. The officer must meet the requirements of paragraph 6–1*b*. For ARNG, CNGB, The Adjutant General of the States (includes territories), and both CG's of the District of

Columbia and Rhode Island National Guard may appoint an ARNG FEB.

FEB approving authority

The officer authorized to approve the findings and recommendations of an FEB. He or she will be the lowest level commander with General Courts Martial Convening Authority (GCMCA). If the appointing authority exercises GCM jurisdiction, approval authority may be exercised at this level. For ARNG, the only FEB approving authority is the CNGB.

FEB reviewing authority

Any officer(s) or organization(s) within the chain of command between the appointing and approving authority that the approving authority requires to review the FEB. Reviewing authorities may make recommendations but are not required to retain copies of the FEB.

Flight surgeon

A physician specially trained in aviation medicine practice whose primary duty is the medical examination and medical care of aircrews.

Flying duty

An assignment that requires officers and crewmembers or noncrewmembers in officer or enlisted status to fly.

Hazardous Duty Incentive Pay

Pay authorized to officers or enlisted members on valid orders to perform crewmember or noncrewmember flying duty.

Monthly incentive pay (non-continuous ACIP)

Pay authorized to-

- a. Flight surgeons while practicing aviation medicine in an authorized operational position.
- b. Aviators who are assigned to operational flying positions and are performing the minimum flight requirements, but are not otherwise entitled to continuous incentive pay.

Pilot status codes

Codes used to identify aviators on the Automated Officer Master File and Officer Record Brief, as follows—

- a. PSC 1. Qualified for aviation service.
- b. PSC 2M. Medically disqualified.
- c. PSC 2A. Nonmedically disqualified by FEB or voluntary disqualification.
- *d. PSC 2T.* Aviation service terminated by branch transfer/single track.

Student aviator

Officers and warrant officer candidates who are enrolled in a course leading to the award of an aeronautical rating as an Army aviator.

Total Federal officer service

Date adjusted for previous enlisted time and/ or break(s) in service that establishes the start of continuous commissioned and warrant officer service. Used to compute basic pay (for commissioned and warrant officers) and ACIP for commissioned officers.

Total operational flying duty credit

The cumulative number of months of flying performed under competent orders by rated or designated members while serving in assignment in which basic flying skills normally are maintained while performing assigned duties and flying performed by members in training that leads to the award of an aeronautical rating or designation.

Section III Special Abbreviations and Terms This section contains no entries.

Index

This index is organized alphabetically by topic and by subtopic within a topic. Topics and subtopics are identified by paragraph number.

 $\begin{array}{c} Aeromedical \ \ consultation \ \ and \ \ in\mbox{-flight} \\ evaluation (ACIE), \ 7\mbox{-}1 \end{array}$

Aviation career incentive pay (ACIP), 3-5 Aviation service entry date (ASED), 3-4

Disqualification

Aeromedical, 4–1 Nonmedical, 5–1

Flight surgeons

Annual minimums, 3–10, table 3–3 Entitlement to pay, 3–5 Orders, 3–11 TOFDC, 3–9

Flying evaluation board (FEB)

Appeals, 6–4 General, 6–1 Membership, 6–2 Procedures, 6–3 Requalification, 6–6

Qualification

Aeromedical waivers, 4–6 Initial, 3–3 Reentry, table 2–4 Responsibilities, 1–4

Requalification

Medical, 4–5 Nonmedical, 5–6

Total Federal officer service (TFOS), 3-6 Total operational flying duty credit (TOFDC), 3-7

Waivers

Medical, 4–6 TOFDC, 3–8

USAPA

ELECTRONIC PUBLISHING SYSTEM TEXT FORMATTER ... Version 2.56

PIN: 030901-000

DATE: 02-09-99

TIME: 15:22:20

PAGES SET: 24

DATA FILE: r600-105.fil DOCUMENT: AR 600-105

DOC STATUS: NEW PUBLICATION